

IAP20 Rec'd PCT/PTO 19 DEC 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Oh
Serial No. Herewith
Filed: Herewith
Title: ELEVATOR ACTIVE SUSPENSION UTILIZING
REPULSIVE MAGNETIC FORCE

INFORMATION DISCLOSURE STATEMENT

Commissioner For Patents
P. O. Box 1450
Alexandria, VA 22313-1450

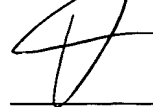
Dear Sir:

Complying with Applicant's duty of disclosure, Applicant encloses a copy of a search report from the corresponding PCT application. The enclosed Form PTO 1449 lists the references cited in the search report. Copies of foreign records are enclosed.

Applicant respectfully requests that the Examiner consider the enclosed and make the cited references of record in this application.

Respectfully submitted,

CARLSON, GASKEY & OLDS



Theodore W. Olds
Reg. No 33,080
400 W. Maple Rd., Ste. 350
Birmingham, MI 48009
(248) 988-8360

Dated: December 19, 2005

PTO/SB/08A (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known

Application Number Herewith 766153

Filing Date	Herewith
-------------	----------

First Named Inventor	Oh
----------------------	----

Art Unit	
----------	--

Examiner Name	
---------------	--

Attorney Docket Number	60.469-241: OT-5178
------------------------	---------------------

Sheet	1	of	1
-------	---	----	---

U. S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		EP 1 067 083 B1	3/16/2005	Toshiba		
		JP 7-215634A	8/15/1995	Hitachi		

**Examiner
Signature**

Date
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Please type a plus sign (+) inside this box →

PTO/SB/08B (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449B/P TO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Application Number	10/561559
		Filing Date	Herewith
		First Named Inventor	Oh
		Group Art Unit	
		Examiner Name	
Sheet 2	of 2	Attorney Docket Number	60,469-241; OT-5178 LAB

[illegible]

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.